

Alabama Department of Human Resources
Jefferson County Permanency Pilot Project



- Q1.** *Section 1.4.7* requires the vendor’s signature on the proposal. Is the “Authorized Vendor Signatory” on the cover page provided and required by DHR sufficient for this requirement?
- R1.** **Yes.**
- Q2.** *Section 2.0* AUTHORITY (pg. 10) states: “No other evaluation criteria, other than as outlined in the RFP, will be used.” Will the scoring guide used by the evaluators contain data not detailed in the RFP (as with the TFC guide)? If so, will this information be provided to the applicant agencies prior to the due date of the RFP?
- R2.** **The scoring guide will be based upon the requirements as outlined in this RFP.**
- Q3.** *Section 3.0* PROJECT OVERVIEW (pg. 13) states that the project will involve “50 children or youth in residential and therapeutic foster care placements...” Will some or all of those children be in placements provided and overseen by entities other than the parties to this contract? If so, during the course of the pilot project, what will be the ongoing role of the entity having physical custody of the child?
- R3.** **Children who are selected for the project may be in a variety of placements, and some children may not be served by a program selected for this project. All parties involved in the child’s planning will remain an integral part of achieving the desired outcomes for permanency. A large portion of how a program may be scored for this project will be based on the issue of how collaboration will be accomplished.**
- Q4.** In *3.1.1* reference is made to the “children/youth identified as ready to return home or to another permanent living arrangement...” and *3.1.2* states “Assessments must include evaluations of the best placements for individual children as well as their families’ capacities to care for them.” Question: is it the MAT that will be used to “identify” children ready to step down and is it the MAT that will be the assessment tool referenced in *3.1.2*?
- R4.** **The MAT will be the assessment tool used to identify children ready for step-down from TFC. The MAT is designed to evaluate children’s behaviors but it is not a complete assessment of the child and the family. The Department is currently in the process of identifying how the MAT will be used in assessing for all levels of services needed for children based on their behaviors.**
- Q5.** In *Section 1.0* PROJECT OVERVIEW (pg. 6) of the RFP, the narrative states that the RFP is to address the “permanency needs of 50 children... in Jefferson County, Alabama”; this is repeated in *Section 3.0* (pg. 13). In *Section 3.2.1* LOCATION OF WORK (pg. 14), the RFP states: “The work for this project is to be performed in Jefferson and surrounding counties.” Please clarify whether all those served by this contract (children and families) will reside in Jefferson County, or whether some could reside in other, contiguous counties.



- R5. Most of the children served will be Jefferson County children but children may be placed in surrounding counties.**
- Q6.** Both the title of the proposal and the introduction state this is for “Jefferson County”; however, *section 3.2.1 on page 14* of the RFP states “ The work for this project is to be performed in Jefferson and surrounding counties.” Please explain.
- R6. See R5.**
- Q7.** Location of work? Does the RFP include counties other than Jefferson County and if so, please identify the counties to be served? *Section 3.2.1* says, "the work for this project is to be performed in Jefferson and surrounding counties."
- R7. See R5.**
- Q8.** *Section 3.1.5 EVIDENCED BASED SERVICES* (pg. 14) states: “Vendors accomplishing a higher rate of stabilization may receive additional slots, if needed; and Vendors not meeting this threshold may receive a reduction in the contracted slots that they may provide.” Please provide a definition of “stabilization”, including the criteria to be used to determine if stabilization has been achieved.
- R8. A respondent should in the RFP identify how stabilization in the placement in the permanent living arrangement will be accomplished, including how long they will be tracked and what remedial services will be provided in case of disruption. Providers that achieved permanency stability may be rewarded if other entities are not able to accomplish it.**
- Q9.** *Section 4.1.2:* The proposal is to provide 3 client references plus a list of current contracts with the Department & all those completed within the previous 3 year period. Clarification on this, please: The list of client references and the list of contractual relationships with Department are 2 separate requirements?
- R9. Yes, these are two separate requirements. Vendors must provide a minimum of three (3) client references in addition, to a list, if any, of all current contractual relationships with the Department and all those completed within the previous three-year period. References may include other agencies, states, etc.**
- Q10.** *Section 4.1.3* requires detail on the qualifications of those that will provide services and administration to the project. Nothing is mentioned of an organizational chart. However, in #13 of the Proposal Compliance Checklist, an organizational chart is mentioned. Does this statement in the Proposal Compliance Checklist serve as a requirement that an organizational chart is to be provided with the proposal?
- R10. Yes. Submit a copy of your agency’s organizational chart.**



- Q11.** *Section 5.1.3 Effective Period:* This refers to a Price Sheet Template Part 1. Is this a Department form and if so, where can we obtain a copy of the form?
- R11.** **Omit the reference to the Price Sheet Template Part. Vendors should provide a statement attesting to the budgetary requirements, include attachments as needed.**
- Q12.** As a point of clarification: The “Affidavit for Trade Secret Confidentiality” form is not used unless the vendor makes a trade secret claim. Correct? If this is correct, on # 19 of the proposal checklist, we would indicate “NA” or “Not Applicable”. Is this the appropriate response and procedure when no trade secret claim is made?
- R12.** **Correct. Yes, if not applicable to your organization, please indicate.**
- Q13.** The Proposal Compliance Checklist does not include the Taxpayer Identification form but this omission does not preclude the requirement of enclosing one with the proposal. Correct?
- R13.** **Correct. Your agency must obtain this information from the IRS.**
- Q14.** Will the contract include working toward permanency for children in traditional foster care in Jefferson County?
- R14.** **No. The children who have been identified to participate in this pilot project are currently in a Therapeutic Foster Care (TFC) or in a residential facility.**
- Q15.** What role will State DHR take in encouraging local DHR and RTF/TFC providers' support of reunification of the identified children?
- R15.** **SDHR will develop a conflict resolution plan to work through disagreements, should they arise.**
- Q16.** What was DHR's criteria for choosing the 50 children to be served through the pilot? Will all of them have viable family and evidence that step-down should be possible within the specified timeframe? Will the provider have the opportunity to conduct their own assessment and make admission decisions based on that assessment?
- R16.** **Children were selected by the county based on the children having a plan for reunification. Children that were selected should have a goal of permanency other than APPLA, which means that they should be able to step-down to a less restrictive level of service. The provider will be able to conduct assessments to help determine appropriate permanency plans for the children they serve.**
- Q17.** In previous RFPs, the outline for response has been very specifically labeled. The response outline DHR desires is somewhat less clear in this one. In order to fulfill all



of the requirements, what sections should we reference in our response and in what order?

R17. Proposals should be organized in accordance with requests for vendor responses in sections 3, 4 and 5.

Q18. Is there an existing protocol for working with youth who are in out-of-home care through providers other than the JCPPP contract entities? In particular, will DHR require the out-of-home placement provider to provide the contract entity with full access to the child, the foster setting and the records of both the child and the placement/care?

R18. With few exceptions, the children in out of home placements should also be with a contract provider. Contract providers are required to furnish information requested by the State or County DHR office. The county DHR will make sure that the out-of-home agency gives full support to the permanency planning for the children in this pilot. If the contracting agency has any problems with having access to needed documentation or physical access to the child in placement, SDHR should be contacted for assistance, if the county office is unable to address the problem satisfactorily.

Q19. *Section 5.1.1* FIXED PROJECT COST (pg. 19) states that. "...the total budget should be based on serving 25 families." Will the youth be referred over a start-up period, or will the contract entity be required to begin work with all 25 cases on the start date of the pilot program?

R19. The list of children will be provided at the time that the contract is put in place.

Q20. In *Section 5.1.1* FIXED PROJECT COST (pg. 19), the RFP states: "It is an expectation of the Department that the Vendor recover 40% of their fixed rate through Medicaid Billing." Given the RFP provider will be competing with the placement provider for Medicaid dollars, how will the department reconcile the 40% Medicaid billing requirement when both agencies' claims can be denied if the other entity bills first?

R20. It would seem that they would be billing for different types of services between the child's provider and the in-home service provider.

Q21. For the purposes of the JCPPP, what is the working definition of "home", as in "home placement" or "home" for treatment services?

R21. Home will be the permanent plan residence for the child.

Q22. What is the definition of "permanency" as it is referenced in the RFP? What criteria will be used to determine whether permanency has been achieved, both in terms of location and success?



- R22. Permanency is based upon the permanent goal for the child as outlined by the ISP team.**
- Q23.** The RFP requires that 70% of the children discharged from the program remain stable at the one-year anniversary of their discharge from the program. How will cases be handled where additional services are required for the child during this one-year period after discharge from the program? Will these services be "reassigned" to the provider who originally discharged the child or will the Department be responsible for service coordination? If the case is reopened by the provider will additional payment be made to the provider? Also, should the case be re-opened, does that also reset the stability clock so that another one-year of stability would be required from the second discharge date?
- R23. The provider shall have a system to track the children after the completion of the program. It is expected that 70% of the children served will still be in their permanent placement. The respondent shall outline what services will be provided while the child is placed in the permanent placement and during the time that the family is still being served by the program to prevent disruption. Any service that may be required after the family is discharged will be planned through the ISP process and should be identified as aftercare services.**
- Q24.** Could you please elaborate on the role that the Department will play in screening referrals to the program? As it appears that not all children in out-of-home care will be able to participate in this Pilot Project, how will the Department determine which youth currently in out-of-home care will be referred to pilot providers?
- R24. The project is for children that are in TFC or residential placements with a permanency goal other than APPLA. The list of names of children being referred to the project will be given to the chosen vendors when the contract is put in place.**
- Q25.** Is it anticipated that all referrals will be Medicaid-eligible upon their discharge from their out-of-home placement? If not, what percentage of children will be Medicaid-eligible?
- R25. There will be no requirement that children are eligible for Medicaid. The list of names of children being referred to the project will be given to the chosen vendors when the contract is put in place.**
- Q26.** Could you please elaborate on the flow of expected referrals? What is the expected time frame for which all 25 referrals to the program will be received, i.e. will providers receive referrals for all 25 at contract initiation or will the referrals be staggered over a period of time? If treatment for children is expected to last for up to 12 months, will all referrals be provided before September 30, 2006 in order to avoid

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a situation where the contract may expire and the treatment for a youth is not yet complete?

R26. See R24.